

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PSS	70891	1/16
O.I.P.E. CLASSIFIER			5-18-00
FORMALITY REVIEW	EVB	66793	62/01/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
0	9	12	9/23/00
1	10	11	10/1/00
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Claim	Final	Original	Date
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